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FEC

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FORM 1	ORGANIZATION	2014 MAY 12 AM 9: 5				
NAME OF COMMITTEE (in full)	(Check if name Example: If typing, type is changed) over the lines.	Office Use Only All CENTE				
IRVIIN FOR	C O N G R E 5 5					
	· · · · · · · · · · · · · · · · · · ·					
ADDRESS (number and street) $[P_1, O_1, B_1O_1X_1, B_1$						
is changed)	CITY A	M ₁ 0 6,5,2,0,5 - 3,0,9,6 STATE A ZIP CODE A				
COMMITTEE'S E-MAIL ADD	DRESS					
(Check if address is changed)	(Check if address NATE P TRNT N FOR CONGILESS.COM					
•	Optional Second E-Mail Address \[\begin{array}{c c c c c c c c c c c c c c c c c c c	RI (CIOINIGITIRIS IS IS IS 10 10 10 1				
COMMITTEE'S WEB PAGE (Check if address is changed)	•	515101610101 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
2. DATE 0.5	01 2014					
3. FEC IDENTIFICATION	NUMBER ► C0.0.5.6.1.1.4.)					
4. IS THIS STATEMENT	NEW (N) OR AMENDED (A)					
I certify that I have examine	ed this Statement and to the best of my knowledge and belief	it is true, correct and complete.				
Type or Print Name of Treas	surer Nathaniel A. Irvia					
Signature of Treasurer	Mart	Date 05 01 1014				
NOTE: Submission of false, e	rroneous, or incomplete information may subject the person signing ANY CHANGE IN INFORMATION SHOULD BE REPORTED	•				
Office Use Only	For further information Federal Election Commi Toll Free 800-424-9530 Local 202-694-1100	ert, ettem i				

I	FEC Fo	m 1 (Revised 02/2009)	Page 2				
	-	OMMITTEE .					
(a)	Ididati	e Committee: This committee is a principal campaign committee. (Complete the candidate information below.)					
	1						
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Com information below.)	plete the candidate				
Name Cano	e of didate	[N,A,T,H,A,N,I,E,L, ,A,V,G,V,S,T,V,S, ,IR,V,I,N, , , , ,					
Cano	didate	Office page 1	State M.				
Party	/ Affiliat		District 0				
(c)	П	This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name							
Cand	didate						
Pari	ty Cor	nmittee: (National, State	(Democratic,				
(d)		This committee is a or subordinate) committee of the	Republican, etc.) Par				
Poli	itical A	ction Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nected organization i				
		Corporation Corporation w/o Capital Stock	Labor Organization				
		Membership Organization Trade Association	Cooperative				
		In addition, this committee is a Lobbyist/Registrant PAC.	•				
/f)	77		egragated fund or no				
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or p committee. (i.e., nonconnected committee)					
		In addition, this committee is a Lebbyist/Registrant PAC.					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Join	nt Fund	raising Representative:					
(g)	M	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to	vo or more political				
	land.	committees/organizations, at least one of which is an authorized committee of a federal candidate.					
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political				
	Com	mittees Participating in Joint Fundraiser					
	1.						
			/				
	2.						
	3.	FEC ID number	P. P. A.				
	4.		~				

FEC Form 1 (Revised	d 02/2009)		Page 3
Write or Type Committee Nat	me		
S Name of Any Connector	Lorganization Affiliated Committee Joint	Fundaciona Depresentativo as	Leadership DAC Sperger
6. Name of Any Connected	l Organization, Affiliated Committee, Joint	rundraising nepresentative, or	Leadership PAC Sponsor
Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connec	ted Organization Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponso
			beel
 Custodian of Records: lo books and records. 	lentify by name, address (phone number o	optional) and position of the perso	on in possession of committee
Full Name	1 H.A.N. = 1616 1 A.U.G.U.S.T.V.	5, F, R, V, F, N, , , , , , ,	_
Mailing Address	[P. O. BOX 3009]	6	
	KOILUM6IA	mo l	657011-
Title or Position	CITY	STATE	ZIP CODE
JIMI BI SI SI SI PIBL		Telephone number	0-868-1965
8. Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the control of the contr	he treasurer of the committee; and	d the name and address of
Full Name of Treasurer	1 HIAINII EICI 1 AIU 1 910 1 5 + 101	5. FRIVISINI	<u>. i. i.</u>
Mailing Address	P 3 3 . 0 . 0 .	9611111111	
	K,O,),U,M,G,A,	STATE	6,52,0,1,-[,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Title or Position	• 1	-	21- 63 - 8 6 8 - 1

FEC Form 1	(Revised 02/2009)		Page 4
Full Name of Designated Agent	Igitihiainijirili iAiniginisitinisi iIid	<u> </u>	
Mailing Address	12. 4011 W Broadway		
	CILIDIMILIS CITY	STATE	ZIP CODE
Title or Position		100	
DICIEINISI SI SI	Telepho	one number <u>[&]&</u>	0-869-11965
safety deposit boxes Name of Bank, Depo		L. L	
Mailing Address	1,2,0, W, 1,2,7,6, 15,7		
	H105	11111	
	KIAIRISIAISI ICIVITY	A D	641051-11719
	CITY	STATE	ZIP CODE
Name of Bank, Depo	ository, etc.		
L			
Mailing Address			<u> </u>
Mailing Address			
Mailing Address			

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Federal Elections Commission 999 E Street, NW Washington, 10 20463

Livin for Congress 1.0. Rox 30096 Columbia, MO 65205

(8/2013)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how if was received. Date of Receipt Hand Delivered Postmarked USPS First Class Mail Postmarked (R/C) USPS Registered/Certified Postmarked **USPS Priority Mail** Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark Shipping Date Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): 5/12/44 DATE PREPARED